

STATE OF HAWAII
Department of Accounting and General Services
Division of Public Works

MONTHLY ESTIMATE

RECEIVED - DAGS
DIV. OF PUBLIC WORKS

FOR THE MONTH OF AUGUST 2009 7009 SEP -4 P 12:03

Date: August 31, 2009

CONTRACTOR: CERTIFIED CONSTRUCTION, INC.

ADDRESS: 1009 ULUPONO STREET

Contract No. 58309

City, State ZIP: HONOLULU, HI 96819

DAGS Job No. 12-36-6448

PROJECT TITLE: WAIMANALO PUBLIC & SCHOOL LIBRARY- REROOF

CONTRACT

Basic Contract Amount \$ 84,000.00

FOR INSPECTION BRANCH USE

☐ SUBMITTAL REGISTER

☐ COMMENCEMENT REQUIREMENTS

DUE MONTHLY:

☐ PROJECT SCHEDULE - INITIAL & ONGOING

☐ DAILY REPORTS

☐ PAYROLL AFFIDAVITS

MONTHLY ESTIMATE CHECKLIST

☒ CONTRACT NUMBER

☒ PROJECT NAME & LOCATION

☒ ALL SIGNATURES

CHANGE ORDERS

Total \$ -

Adjusted Contract Amount \$ 84,000.00

WORK ACCOMPLISHED**Basic Contract****Change Order****Total**

Completed to Date 100.00% \$ 84,000.00

#DIV/0! \$ - \$ 84,000.00

Retained **REDUCED** ☐ \$ 4,200.00

\$ - \$ 4,200.00

Amount Subject to Payment \$ 79,800.00

\$ - \$ 79,800.00

Payments to Date \$ \$0.00

\$ -

Payments Now Due \$ 79,800.00

\$ - **\$ 79,800.00**

Payment No. **FINAL** ☐ 1

Remarks: CHANGE ORDER REQUEST PENDING

1. Computed and Checked by:

2. I certify that the above bill is correct, just, that payment has not been received, and all payroll affidavits have been submitted, are current, or proper deductive exclusions have been made to this request.

3. Recommended: [Signature] Project Inspector or Engineer

Date: 9/10/09

CERTIFIED CONSTRUCTION, INC.

4. Recommended: [Signature] Area Engineer/Architect

Date: 9/10/09

Name of Contractor

5. Approved: [Signature] Branch Chief or District Engineer

Date: SEP 10 2009

By signature / Title: [Signature]

Date: 8/31/09

The Public Works Administrator certifies that change orders have been issued and the work performed.

[Signature] State Public Works Administrator

SEP 10 2009

Date:

For the Month of: AUGUST 2009

Contract No.: 58309
DAGS Job No.: 12-36-6448

[illegible]

I certify that the above retentions are correct for this request.

Name of Contractor

8/31/09

Checked/Verified by:

Initial - Project Inspector or Engineer

NOTE:
Columnar totals shall be equal in dollar value to that on
the Monthly Estimate Sheet

STATE OF HAWAII
DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES
DIVISION OF PUBLIC WORKS
Monthly Payment Slip

PAYMENT NO.: 1

PROJECT TITLE: WAIMANALO PUBLIC AND SCHOOL LIBRARY - REROOF

BILLING MONTH: August-09

DAGS JOB NO.: 1 2-36-6448

CONTRACT NO.: 58309

CONTRACTOR: CERTIFIED CONSTRUCTION, INC

VENDOR CODE: 11385980

Original Contract Payment

Suffix: 1

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
01	B07-422M	\$84,000.00	\$4,200.00	\$79,800.00
Totals:		\$84,000.00	\$4,200.00	\$79,800.00

Change Order Payment

Suffix: 2

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
02	B07-422M	\$0.00	\$0.00	\$0.00
Totals:				

Grand Total:	\$84,000.00	\$4,200.00	\$79,800.00
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Lloyd Ogata 9/15/2009
Verified By DATE

(This Section for Administrative Services Office Use Only)

Vendor Code 11385980

Cost Code 3A1

Voucher No.

09189N53

Verified By

pr

9/21/09